





PATENT #9

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:Pflaum, Zlatko; Milivojevic, Dusan; and Senica, David

AUG 2 2 2002

Application No.: 09/600,566

Group No.: 1651

TECH CENTER 1600/2900

Filed: 10/16/2000

Examiner: Saucier, S.

For:Process for the Obtaining of HMG-CoA Reductase Inhibitors of High Purity

RESPONSE UNDER
37 C.F.R. section 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP
1651

Box AF Commissioner for Patents Washington, D.C. 20231

CERTIFICATION UNDER 37 C.F.R. sections 1.8(a) and 1.10*

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I hereby certify that, on the date shown below, this correspondence is being:

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37 C.F.R. section 1.8(a)

37 C.F.R. section 1.10*

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TRANSMISSION

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Date: August 15, 2002

Signature

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AMENDMENT OR RESPONSE AFTER FINAL REJECTION--TRANSMITTAL

1.Transmitted herewith is an amendment after final rejection (37 C.F.R. 1.116) for this application.

STATUS

2. Applicant is other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for one month:

Fee:\$110.00

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below

	(Col.1)		(Col. 2)	(Col. 3)	SMALL ENTITY		
	Claims Remaining After Amendmer		Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	
Total	23	Minus	24	= 0	x \$18 =	\$0	
Indep.	2	Minus	3	= 0	x \$80 =	\$0	
First Presentation of Multiple Dependent Claim					+ \$270 =	\$0	
					Total Addit. Fee	\$ <u>0</u>	

^{*}If the entry in Col. 1 is less than the entry in Col. 2, write "O" in Col. 3,

No additional fee for claims is required.

(Amendment or Response After Final Rejection--Transmittal--page ? of 3)

^{**}If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 1) is less than 20, enter "20".

^{***}If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 2) is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

FEE PAYMENT

5. Attached is a check in the sum of \$110.00.

FEE DEFICIENCY

6.If any additional extension and/or fee is required, charge Account No. 19-4972. If any additional fee for claims is required, charge Account No. 19-4972.

Date: August 15, 2002

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